2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000004219

FILED Sep 30, 2009 Secretary of State

Entity Name: HILLSBOROUGH COUNTY ANTI-DRUG ALLIANCE, INC.

Current Principal Place of Business: New Principal Place of Business: 6800 N. DALE MABRY HWY. 130 TAMPA, FL 33614 **New Mailing Address: Current Mailing Address:** 6800 N. DALE MABRY HWY. **SUIT 130** TAMPA, FL 33614 US FEI Number: 71-0950570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTINEZ, ELVIN JR SHORT, GENIE S 800 E. KENNEDY BLVD. 6800 N. DALE MABRY HWY. 5TH FLOOR #130 TAMPA, FL 33602 US TAMPA, FL 33614 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: GENIE S. SHORT 09/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MARTINEZ, JR, ELVIN JR. SHORT, GENIE Name: Name: 800 E. KENNEDY BLVD. - 5TH FLOOR Address: 6800 N. DALE MARBRY HWY. #130 Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33614 US Title: VC () Delete Title: (X) Change () Addition ADERHOLD, TOM Name: BUFE, SONYA Name: Address: 5215 WILCOX RD. Address: 6800 N. DALE MABRY HWY. #130 City-St-Zip: TAMPA, FL 33624 US City-St-Zip: TAMPA, FL 33614 US Title: () Delete Title: () Change () Addition FEINBERG, JACK Name: Name: 6800 N. DALE MABRY HWY - SUITE 130 Address: Address: City-St-Zip: TAMPA, FL 33614 US City-St-Zip: () Delete (X) Change () Addition Title: Title: Name: DAVIS, PAUL MAJOR Name: WOYTOWICH, RICHARD 6800 N. DALE MABRY HWY. SUITE 130 6800 N. DALE MABRY HWY. SUITE 130 Address: Address: City-St-Zip: TAMPA, FL 33614 US City-St-Zip: TAMPA, FL 33614 US Title: DIR () Delete Title: () Change () Addition CARRIGAN, SUSAN Name: Name: 6800 N. DALE MABRY HWY. SUITE 130 Address: Address: City-St-Zip: TAMPA, FL 33614 US City-St-Zip: Title: (X) Delete Title: () Change () Addition SHORT, GENIE S Name: Name: Address: 6843 CIRCLE CREEK DR Address: PINELLAS PARK, FL 33781 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENIE S. SHORT C 09/30/2009